FEC FORM 1

10020674249

STATEMENT OF **ORGANIZATION**

SECRETARY OF THE SENATE 10 OCT -7 AH 10: 18

			Offi	ce Use Only	
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5		
Dan Coats	Florer Itmiditian	10		4	
ADDRESS (number and street)	ADDRESS (number and street) $(P_1O_1, B_1O_1X_1, 3_1O_1X_1, 4_1X_1, \dots, 4_1X_1)$				
(Check if address is changed)					
	Indicana po		IN 46	2230-	
	·	CITY	STATE	ZIP CODE	
COMMITTEE'S E-MAIL ADDRE	SS (Please provide only one e	-mail address)			
(Check if address is changed)	ld lioing & hail it reinidier i cioim				
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COMMITTEE'S WEB PAGE ADI	DRESS (URL)				
(Check if address is changed)	WWW.Coatsforindiana.com				
			 		
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2. DATE 10 2010					
3. FEC IDENTIFICATION NUMBER CO.0.416374					
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)			
I certify that I have examined th	nis Statement and to the best	of my knowledge and belief it	is true, correct and	complete.	
Total or District Name of Transcript	Douglas P. Lor	- M			
Type or Print Name of Treasure	DOUGHAS 1: LOF	")			
Signature of Treasurer	Dosglas P. Log	Trun	Date (190)	01 2010	
NOTE: Submission of talse, errone		may subject the person signing to ON SHOULD BE REPORTED W		enalties of 2 U.S.C. §437g.	
Office Use Only		For further information of Federal Election Commissi Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)	